2700 INTERNAL TRANSFER REQUEST FOR S.N. 19/940, 347		
DATE: 10 24	al FROM:	(Print name)
	REASON(S):	·
FORWARD TO:	A. You had Parent	(check box)
A. Art Unit:26_	2 / B. See Title	(check box)
B. Class: . 38	C. See Abstract	(check box)
C Subclass: 23	32 † D. See Claim(s):	
FURTHER EXPLANATION	IF NEEDED: Lained	·-·
DATE:	FROM:	(print name)
	REASON(S):	
FORWARD TO:	A. You had Parent	(check box)
A. Art Unit:	B. See Title	(check box)
B. Class:	C. See Abstract	(ctwck box)
C Subclass:	D. See Claim(s):	-
DATE:	FROM:	(print name)
	REASON(S):	
FORWARD TO CLASSIFI		(check box)
	D. See Hac	(check box)
	C. See Abstract	(check bod)
	D. See Claim(s):	
FURTHER EXPLANATION	VIF NEEDED:	
DISPOSITION BY 270	00 CLASSIFICATION	
DATE:	CLASSIFIER:	
	REASON(S):	
FORWARD TO:	A. You had Parent	(check box)
A. Art Unit:	B. See Title	(check box)
B. Class:	C. See Abstract	(check boot
	D. Con Claimin	***

FURTHER EXPLANATION IF NEEDED: